Application or Docket Number

| PATENT APPLICATION FEE DETERMINATION RECORD |
|---|
|---|

Effective October 1, 2000

54C0127

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | | OTHER THAN OR SMALL ENTITY | | |
|---|--|---|-------------------------------------|------------------------------|---------------------------------------|--------------------------------|---------------|--------------------|------------------------|----|----------------------------|------------------------|--|
| TOTAL CLAIMS | | | ユ | | | | Γ | RATE | FEE | | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | В | ASIC FEE | 355.00 | OR | BASIC FEE | 710.00 | |
| то | TAL CHARGEA | BLE CLAIMS | 7 minus 20= | | . 0 | | | X\$ 9= | | OR | X\$18= | | |
| IND | EPENDENT CL | AIMS | 2 minus 3 = | | | | | X40= | | OR | X80= | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | +135= | | OR | +270= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL | 710 | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | | | OTHER THAN | | |
| | | (Column 1) | | (Column 2) (Column 3) | | | _ | SMALL E | ENTITY | OR | SMALL | ENTITY | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVI PAID | BER | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | . 9 | Minus | ر | 0 | = — | | X\$ 9= | | OR | X\$18= | | |
| AME | Independent | NTATION OF MI | Minus | *** | 5 T CLAIM | - | | X40= | | OR | X80= | | |
| <u> </u> | rino i Friese | NIATION OF M | JEHIPLE DEF | EINDEIN | CLATIVI | | | +135= | | OR | +270= | | |
| | | | | | | | | | | OR | TOTAL ADDIT, FEE | | |
| | ا مارام میش افاد | ^ | DDIT. FEE | | | • | | | | | | | |
| AMENDMENT B | | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | HIGI NUM PREVI | mn 2) HEST MBER OUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * . | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | * | Minus | *** | | = | ╽┟ | X40= | | OR | X80= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | OR | | | |
| ·; | | * | | | | | Ĺ | +135= | | OR | +270=× [}] | | |
| j. | - | | | ; | | | A | TOTAL DDIT. FEE | | OR | TOTAL ADDIT. FEE | | |
| | · | (Column 1) (Colum | | | | (Column 3) | _ | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | NUN | HEST MBER OUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | * | Minus | *** | T () () () | <u> -</u> | | X40= | | OR | X80= | | |
| L | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +135= | | OR | +270= | - (A.) | |
| ** | If the entry in colu If the "Highest Nu | mn 1 is less than t | he entry in colu aid For" IN THI | mn 2, writ S SPACE | te "0" in co is less tha | olumn 3. an 20, enter "20.' | ا م | TOTAL | | OR | TOTAL | | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | | |